ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name and Address)*:	TELEPHONE NO.:	**FOR COURT USE ONLY**
ATTORNEY FOR *(Name)*:		
Insert name of court and name of judicial district and branch court, if any:		
PLAINTIFF/PETITIONER:		
DEFENDANT/RESPONDENT:		

REQUEST FOR DISMISSAL ☐ **Personal Injury, Property Damage, or Wrongful Death** ☐ **Motor Vehicle** ☐ **Other** ☐ **Family Law** ☐ **Eminent Domain** ☐ **Other** *(specify)*:	CASE NUMBER:

— **A conformed copy will not be returned by the clerk unless a method of return is provided with the document.** —

1. **TO THE CLERK:** Please **dismiss** this action as follows:
   a. (1) ☐ With prejudice   (2) ☐ Without prejudice

   b. (1) ☐ Complaint   (2) ☐ Petition
      (3) ☐ Cross-complaint filed by *(name)*:   on *(date)*:
      (4) ☐ Cross-complaint filed by *(name)*:   on *(date)*:
      (5) ☐ Entire action of all parties and all causes of action
      (6) ☐ Other *(specify)*:*

Date:

....
(TYPE OR PRINT NAME OF ☐ ATTORNEY ☐ PARTY WITHOUT ATTORNEY)

* If dismissal requested is of specified parties only, of specified causes of
 action only, or of specified cross-complaints only, so state and identify
 the parties, causes of action, or cross-complaints to be dismissed.

▶ _____
                    (SIGNATURE)
Attorney or party without attorney for:

☐ Plaintiff/Petitioner   ☐ Defendant/Respondent
☐ Cross-complainant

2. **TO THE CLERK:** Consent to the above dismissal is hereby given.**
Date:

....
(TYPE OR PRINT NAME OF ☐ ATTORNEY ☐ PARTY WITHOUT ATTORNEY)

** If a cross-complaint—or Response (Family Law) seeking affirmative
  relief—is on file, the attorney for cross-complainant (respondent) must
  sign this consent if required by Code of Civil Procedure section 581(i)
  or (j).

▶ _____
                    (SIGNATURE)
Attorney or party without attorney for:
☐ Plaintiff/Petitioner   ☐ Defendant/Respondent
☐ Cross-complainant

(To be completed by clerk)
3. ☐ Dismissal entered as requested on *(date)*:
4. ☐ Dismissal entered on *(date)*:   as to only *(name)*:
5. ☐ Dismissal **not entered** as requested for the following reasons *(specify)*:

6. ☐ a. Attorney or party without attorney notified on *(date)*:
      b. Attorney or party without attorney not notified. Filing party failed to provide
         ☐ a copy to conform   ☐ means to return conformed copy

Date: _____   Clerk, by _____ , Deputy

REQUEST FOR DISMISSAL